



Education Provider Agreement

Name: _____

Address: _____

City, State, Zip: _____

Title of Course: _____

Provider agrees to:

1. File with the Director a course schedule no less than thirty (30) days prior to course offering that includes **course title, course number assigned by the Department, and date/time and location**, via mail, fax or email to kc.schaler@finance.idaho.gov.
2. Properly monitor participant's attendance and attention.
3. Issue certificates of attendance/completion with approved course number to any participant who satisfactorily completes approved course offerings.
4. Maintain student's records for three (3) years.
5. Submit a class roster to the Director within thirty (30) days of participants' successful course completion.
6. Notify the Director no less than five (5) days prior to course cancellation and reason for same.
7. Report any material changes including addition of or substitution of instructors in the information submitted to the Director no less than 30 days prior to proposed use.
8. Notify the Director if any provider or instructor has/had a mortgage license revoked or suspended in any jurisdiction. Notification must be made within thirty (30) days of occurrence if subsequent to initial filing or approval.
9. Submit a list of all previously approved instructors.

I certify that the information contained in the application and provider agreement herein is true to the best of my knowledge, that I have reviewed the Rules governing continuing education in Idaho, have reviewed the instructions and course criteria information, and agree to the guidelines as stated above.

Date

Authorized Signature/Title

Typed/Printed Name

CONSUMER FINANCE BUREAU
800 Park Blvd Ste 200, Boise, ID 83712
Mail To: P.O. Box 83720, Boise ID 83720-0031
Phone: (208) 332-8002 Fax: (208) 332-8096
<http://finance.idaho.gov>